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OCT 04 2007

Docket No.: 4749-009

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Hidehiro SHINDO

U.S. Patent Application No. 10/595,540

Group Art Unit: 2833

Filed: April 27, 2006

Examiner: HIEN D VU

For: CONNECTOR

Dear Sir:

Transmitted herewith is an Amendment in the above identified application.

No additional fee is required.
 Small entity status of this application has been established.
 Also attached: Marked Up and Clean Replacement Specifications

The fee has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	Fee
Total Claims	7	20		x \$ 50 =	\$ 0.00
Independent Claims	2	3		x \$200 =	\$ 0.00
If multiple claims newly presented, add \$360.00					
Fee for extension of time					
TOTAL FEE DUE					\$ 0.00

A credit card authorization form in the amount of _____ is attached

The Commissioner is hereby authorized to charge payment of any deficiency in fees associated with this communication or credit any overpayment, to Deposit Account No. 07-1337, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

LOWE HAUPTMAN HAM & BERNER, LLP



CERTIFICATION OF FACSIMILE TRANSMISSION
 I HEREBY CERTIFY THAT THIS PAPER IS BEING FACSIMILE TRANSMITTED TO THE PATENT AND TRADEMARK OFFICE

ON THE DATE SHOWN BELOW

CHRISTINA FRYE
 TYPE OR PRINT NAME OF PERSON SIGNING CERTIFICATION
Christina 10/4/07
 SIGNATURE DATE
571 273 8300
 FACSIMILE NUMBER

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 Date: October 4, 2007

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002/027

OCT 04 2007

Docket No.: 4749-009

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Hidehiro SHINDO

Confirmation No. 2574

U.S. Patent Application No. 10/595,540

Group Art Unit: 2833

Filed: April 27, 2006

Examiner: Hien D Vu

For: CONNECTOR

AMENDMENT UNDER 37 C.F.R. 1.111

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

In response to the Office Action of July 6, 2007, please amend the above-identified application as follows:

CERTIFICATION OF FACSIMILE TRANSMISSION
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 ON THE DATE SHOWN BELOW

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